

**STATE OF HAWAII  
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**

**NOTIFICATION  
LIFE INSURANCE POLICY ILLUSTRATIONS**

NAIC Group #	
Insurer Name(s)	NAIC Company #

	Check appropriate				
Policy/Certificate #	Policy	Certificate	Individual	Group	Generic Name

In accordance with §431:10D-403, Hawaii Revised Statutes, the captioned insurer **declares** that the foregoing policy/certificate is to be marketed (check only one)

- \_\_\_\_\_ With a basic illustration
- \_\_\_\_\_ With basic and supplemental illustrations
- \_\_\_\_\_ Without an illustration

Illustrations shall conform with §§431:10D-404, 431:10D-405 and §431:10D-406, as applicable.

\_\_\_\_\_ Initial Notice

\_\_\_\_\_

Date

\_\_\_\_\_ Revised Notice

\_\_\_\_\_

Signature

\_\_\_\_\_

Type Name & Title

\_\_\_\_\_

Address

\_\_\_\_\_

Telephone Number